



ATTACHMENT A

HOUSEHOLD GOODS STATEMENT OF SUPPORT

Your application must include at least three shipper or public statements supporting the proposed household goods moving service. Shipper statements may come from persons or organizations with a need for household goods moving services, or who support your request for a permit to provide those services. These forms may be copied by you as needed.

Applicant Name:
Kimberly Woodard TRAVIS

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name:
Chris Bulluck, Owner - Miracle MANI Moves LLC

Address (include street address, mailing address, city, state, zip, and county):
PO Box 813
Richland, WA 99352
(Confidential) 4918 Bel Air Dr.

Phone Number:
509 627-9773

Do you currently need the services of a residential household goods moving company?
 No Yes If yes, please describe your current moving needs:

Do you anticipate a future need for the services of a residential household goods moving company?
 No Yes If yes, please describe your future moving needs:

Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community:
To have an honest company, person and someone who grew up here.

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?
Mr Bulluck grew up here in our area.

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct

Kimberly Travis
Signature of Person Completing Form

5-31-19
Date and Location



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Applicant Name:

NINA Duckworth

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name:

Chris Buleonk, Owner - Miracle Man Moving, LLC

Address (include street address, mailing address, city, state, zip, and county):

1105 W. 10th Ave # J170

Phone Number:

509-440-8314

Do you currently need the services of a residential household goods moving company?

No Yes If yes, please describe your current moving needs:

Do you anticipate a future need for the services of a residential household goods moving company?

No Yes If yes, please describe your future moving needs:

Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community:

I have known Chris since he was born, he is an excellent person & business man, I believe and trust him & his company to do great work.

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?

Chris is a very trustworthy person, a man of his word. I trust him with my life.

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Nina Duckworth
Signature of Person Completing Form

6/3/19 Kennewick, WA
Date and Location



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Applicant Name: *KATHY A. FULKERSON*

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name:
CHRIS BULLOCK, OWNER - MIRACLE MAN MOVERS, LLC

Address (include street address, mailing address, city, state, zip, and county):
*210 W. WYOMING AVE
PO BOX 142
IRRIGON, OR 97844*

Phone Number:
541-379-9118

Do you currently need the services of a residential household goods moving company?
 No Yes If yes, please describe your current moving needs:

Do you anticipate a future need for the services of a residential household goods moving company?
 No Yes If yes, please describe your future moving needs:
AT SOME TIME MAY PLAN TO MOVE.

Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community:
NEED GOOD SMALL BUSINESS (MOVING) COMPANIES THAT ARE HONEST & RELIABLE.

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?
HE IS A FAIR & HONEST BUSINESS

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

[Signature]
Signature of Person Completing Form

5/30/19 Kennewick, WA
Date and Location